STATEMENT OF POLICY

Brownfields

Policy
The National Association of County and City Health Officials (NACCHO) urges federal, state, tribal, and local governments and related agencies to engage policymakers, government agencies, non-government organizations, businesses, and communities to produce and support policies, legislation, regulation, programs, research, and resources that support the identification, remediation, and redevelopment of brownfield sites.

NACCHO commits to the following activities to advance brownfield policies and practices:

- Supporting local health departments to be actively involved in local, state, regional, and federal decision-making regarding pollution allowances, land-use planning, and other items impacting pollution prevention and mitigation.1
- Urging state agencies and local health departments to develop policies and programs to promote environmental justice, such as identifying and mitigating disproportionate exposures to environmental health hazards. These might include preventing and eliminating disproportionate siting of hazardous facilities, preventing the enactment of discriminatory and racist (including unintentionally harmful) land use laws and policies, and ensuring nondiscriminatory compliance with all environmental, health, and safety laws.2
- Supporting state agencies and local health departments to encourage the inclusion of brownfields redevelopment in community land trust stewards.
- Partnering with local health departments to educate community leaders on principles of equitable development and ensure that the economic and health benefits of site cleanup are shared with minority groups living near brownfield sites, and that these groups are not displaced following redevelopment.
- Supporting federal and state agencies to incorporate comprehensive, formal, and systemic integration of local public health considerations informed by impacted communities into community design processes, including community planning, regulations, design of new development and redevelopment, and design of the public realm to promote and protect the health of communities.3
- Supporting federal agencies to ensure that contamination is cleaned to appropriate health and environmental standards and does not threaten public health and the environment.
- Encouraging federal, state, and local governments to enact anti-racist land use and development policies that prevent urban sprawl or the displacement of populations that leads to the decay and destabilization of communities and concomitant stresses that create health problems.4
• Supporting federal, state and local governments to ensure early, sustained, and effective participation by affected community residents in all stages of brownfields decision-making and that mechanisms are available to assist in making this possible (e.g., through implementation of the Protocol for Assessing Community Excellence in Environmental Health guidebooks).5, 6
• Encouraging federal, tribal, state, and local governments to require the utilization of Health Impact Assessments (HIAs) for brownfields redevelopment.7
• Supporting federal agencies in building the capacity of local health departments to participate in the redevelopment process by providing technical assistance, training, advisory groups, and other support to ensure effective participation in brownfield redevelopment assessment and remediation processes.
• Urging federal, tribal, state, and local governments to ensure that future uses of a property do not include facilities or activities that will lead to new health problems.
• Urging state and local health departments to actively incorporate NACCHO’s Public Health Principles and Guidance for Brownfields Policies and Practices in their everyday work.8

NACCHO recommends that local health departments conduct the following activities:
• Engage community members, especially BIPOC community members, affected by brownfields to empower them to participate in the redevelopment process through community engagement and education.
• Partner with academic, governmental, and non-governmental agencies seeking to evaluate the health implications of brownfields and provide support for evidence-based interventions that address environmental justice.
• Utilize HIA resources and tools to facilitate brownfield redevelopment processes.
• Collaborate with brownfield grantees to monitor the ongoing health impacts associated with previous use.
• Apply for brownfields funding from the Environmental Protection Agency (EPA) or work with a funded partner to provide health monitoring services, community engagement, and outreach to affected populations, including BIPOC populations (up to 10% of the redevelopment funding can be devoted to this activity).
• Integrate principles of equitable development into brownfield cleanup activities to prevent displacement of low-income and BIPOC residents and ensure that these groups receive the benefits of site redevelopment.

Justification
The EPA’s definition of brownfield is “real property, the expansion, redevelopment, or reuse of which may be complicated by the presence or potential presence of a hazardous substance, pollutant, or contaminant.”9 Communities with brownfields sites are more likely to have higher proportions of BIPOC populations and tend to have disproportionate environmental, social, economic, and health disparities. The EPA has led the effort to address these disparities and several federal agencies have begun initiatives to support brownfields redevelopment. For example, to improve health outcomes through redevelopment, the Agency for Toxic Substances and Disease Registry National Brownfields/Land Reuse Health Initiative emphasizes the integration of public health in brownfields redevelopment.
Communities and non-profit organizations across the country, with the support of all levels of government, are moving rapidly to redevelop brownfield sites. Since the inception of the brownfields program in 1995, the EPA has identified over 450,000 such sites (which contribute to urban decay as eyesores and nuisances, sites for potential dumping and future health risks, and lower quality of life) nationally.9 People in economically distressed urban areas are especially vulnerable to exposure from contaminated brownfields sites. Appropriate attention is not being given to ensure that health risks are being addressed during the development process.10 The health of the public is intimately linked to economic prosperity and economic development, and such development may potentially affect public health, positively or negatively.11, 12

The American Recovery and Reinvestment Act of 2009 provided $100 million to the EPA Brownfields Program, which are awarded to eligible entities through brownfields job training, site assessment, revolving loan fund, and cleanup grants.13 The Brownfields Utilization, Investment, and Local Development (BUILD) Act of 2018 reauthorized provisions to the EPA’s Brownfields Program through 2023. Major changes under the BUILD Act include fewer funding restrictions for petroleum sites, expanded grant eligibility for non-profit and community organizations, authorization of a new grant program for smaller or disadvantaged communities, and increased funding for grant recipients.14

Since the inception of the EPA’s Brownfields Program in 1995, brownfields redevelopment projects have been shown to yield significant environmental benefits when compared to other land development methods, including greenfield sites or conventional alternatives.15, 16 Brownfields redevelopment has also been shown to be economically beneficial: residential property values increased between 5%-15.2% following redevelopment, and local governments generated additional tax revenue up to $97 million in the year after cleanup.17 While redevelopment of brownfield sites offers benefits to environmental and human health, there are concerns that the economic benefits are not distributed equitable among residents. Brownfield sites are disproportionately concentrated in areas with higher populations of racial and socioeconomic minorities, and their redevelopment often results in gentrification and displacement of these populations.18, 19

References

**Record of Action**

*Proposed by NACCHO Environmental Health Committee*

*Adopted by NACCHO Board of Directors September 23, 1998*

*Amended July 14, 1999*

*Updated September 2003*

*Updated October 2004*

*Updated July 2012*

*Updated November 2015*

*Updated June 2022*